

**HAWAII EMPLOYER-UNION HEALTH BENEFITS TRUST FUND**  
**ACTIVE EMPLOYEES**  
**BU12**  
**EMPLOYER/EMPLOYEE CONTRIBUTIONS**  
**EFFECTIVE JANUARY 1, 2010 (KAISER PLANS)**  
**EFFECTIVE FEBRUARY 1, 2010 (ALL OTHER PLANS)**

| <b>Benefit Plan</b>   | <b>Type of Enrollment</b> | <b>Monthly Employer Contribution</b> | <b>Monthly Employee Contribution</b> | <b>Total Contribution Required</b> |
|---|---------------------------|--------------------------------------|--------------------------------------|------------------------------------|
| <b>MEDICAL PLANS</b>  |                           |                                      |                                      |                                    |
| <b>EUTF PPO (HMA) - 90/10 Plan<br/>RSN Chiropractic</b>                               | Self                      | \$152.52                             | \$100.26                             | \$252.78                           |
|   | Two-Party                 | \$380.92                             | \$250.96                             | \$631.88                           |
|   | Family                    | \$494.12                             | \$325.04                             | \$819.16                           |
| <b>EUTF PPO (HMSA) - 80/20 Plan<br/>RSN Chiropractic</b>                              | Self                      | \$152.52                             | \$92.06                              | \$244.59                           |
|   | Two-Party                 | \$380.92                             | \$230.42                             | \$611.34                           |
|   | Family                    | \$494.12                             | \$298.42                             | \$792.54                           |
| <b>EUTF Prescription Drug (informedRx)</b>  | Self                      | \$26.18                              | \$17.06                              | \$43.24                            |
|   | Two-Party                 | \$65.36                              | \$42.74                              | \$108.10                           |
|   | Family                    | \$84.92                              | \$55.36                              | \$140.28                           |
| <b>EUTF HMO (HMSA)<br/>Prescription Drug<br/>RSN Chiropractic</b>                     | Self                      | \$178.70                             | \$156.82                             | \$335.52                           |
|   | Two-Party                 | \$446.28                             | \$392.66                             | \$838.94                           |
|   | Family                    | \$579.04                             | \$508.76                             | \$1,087.80                         |
| <b>Kaiser Comprehensive (eff 1/1/10)<br/>Prescription Drug<br/>RSN Chiropractic</b>   | Self                      | \$178.70                             | \$78.76                              | \$257.46                           |
|   | Two-Party                 | \$446.28                             | \$195.44                             | \$641.72                           |
|   | Family                    | \$579.04                             | \$252.92                             | \$831.96                           |
| <b>Kaiser Basic (eff 1/1/10)<br/>Prescription Drug<br/>RSN Chiropractic</b>           | Self                      | \$178.70                             | \$49.44                              | \$228.14                           |
|   | Two-Party                 | \$446.28                             | \$122.16                             | \$568.44                           |
|   | Family                    | \$579.04                             | \$157.92                             | \$736.96                           |
| <b>EUTF Supplemental (HMSA)<br/>informedRx Prescription Drug<br/>RSN Chiropractic</b> | Self                      | \$106.46                             | \$69.14                              | \$175.60                           |
|   | Two-Party                 | \$267.00                             | \$174.16                             | \$441.16                           |
|   | Family                    | \$350.38                             | \$227.96                             | \$578.34                           |
| <b>Royal State Supplemental<br/>Prescription Drug<br/>RSN Chiropractic</b>            | Self                      | \$35.06                              | \$21.56                              | \$56.62                            |
|   | Two-Party                 | \$86.14                              | \$53.60                              | \$139.74                           |
|   | Family                    | \$97.82                              | \$59.58                              | \$157.40                           |
| <b>EUTF High Deductible Health Plan<br/>(HMSA)<br/>Prescription Drug</b>              | Self                      | \$178.70                             | \$100.88                             | \$279.58                           |
|   | Two-Party                 | \$446.28                             | \$254.30                             | \$700.58                           |
|   | Family                    | \$579.04                             | \$331.18                             | \$910.22                           |
| <b>DENTAL PLAN</b>  |                           |                                      |                                      |                                    |
| <b>HDS Dental</b>   | Self                      | \$18.58                              | \$12.20                              | \$30.78                            |
|   | Two-Party                 | \$37.20                              | \$24.38                              | \$61.58                            |
|   | Family                    | \$76.96                              | \$24.38                              | \$101.34                           |
| <b>VISION PLAN</b>  |                           |                                      |                                      |                                    |
| <b>VSP Vision</b>   | Self                      | \$3.64                               | \$2.40                               | \$6.04                             |
|   | Two-Party                 | \$6.76                               | \$4.42                               | \$11.18                            |
|   | Family                    | \$8.84                               | \$5.78                               | \$14.62                            |
| <b>LIFE INSURANCE</b>   |                           |                                      |                                      |                                    |
| <b>Standard Life Insurance</b>  | Employee                  | \$4.16                               | \$0.00                               | \$4.16                             |
|   |                           |                                      |                                      |                                    |